PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2880

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through, 5 should be completed when appropriate. All further corresponders including the Purent, advance orders and notification of nanientance fee on swill be nailed to purent correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

10/02/2007

TRASKBRITT, P.C./ ALLIANT TECH SYSTEMS P.O. BOX 2550

SALT LAKE CITY, UT 84110

VIA ELECTRONIC FILING DECEMBER 28, 2007

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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	A1	TORNEY DOCKET NO.	CONFIRMATION NO.			
10/727,093 TITLE OF INVENTION	12/02/2003 I: METHOD AND APP/	ARATUS FOR SUPPRES	Gary K. Lund SSION OF FIRES	250	7-6011US (22032-US)	6000			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	E TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1440	\$300	\$0	\$1740	01/02/2008			
EXAM	IINER	ART UNIT	CLASS-SUBCLASS	1					
HWU, E	AVIS D	3752	169-006000	•					
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.83). CFR 1.83). Change of correspondence address (or Change of Correspondence Address form FTO/SB/12) attached. "Fee Address" indication (or "Fee Address" Indication form FTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number Is required.			(1) the names of up to or agents OR, alternation	a single firm (having as a member a 2					
(A) NAME OF ASSI Alliant	GNEE Techsystems	Inc.	(B) RESIDENCE: (CITY Edina, Mir	and STATE OR COU	NTRY)	seument has been filed for			
4a. The following fec(s) are submitted: Thissue Fee Upblication Fee (No small entity discount permitted) Advance Order - # of Copies			th. Payment of Fee(s): (Please first renpply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. **COTTLE Director is hereby suthorized to charge the gequired [6e(s), any deficiency, or credit any overpayment, to Deposit Account Number _ (20—14 59) (enclose an extra copy of this form).						
NOTE: The Issue Fee an	s SMALL ENTITY state d Publication Fee (if req	s. Sec 37 CFR 1.27.	b. Applicant is no long			R 1.27(g)(2). c assignee or other party in			
Authorized Signature Typed or printed name	Bradley B.	Bd		Registration No.	ember 28, 2007 46801				
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Conflictmakiny is governed by 33 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to also I a minutes to complete, including gathering, propering, and in the complete of the compl									

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